

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	L04617097 (JRV)
	First Named Inventor or Application Identifier	
	Heidecker et al.	
	Express Mail Label No.	EL711220647US
	Date of Deposit	October 19, 2000

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>	ADDRESS Box Patent Application TO: Commissioner for Patents Washington, DC 20231
1. <input type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total pages 54] 45 - pages description 1 - pages abstract 8 - pages claims 57 - Total claims 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets 4] <input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal [Total drawings 4] 4. <input type="checkbox"/> Oath or Declaration [Total pages] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> [Note Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation by Reference <i>(usable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input checked="" type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy (identical to computer copy) c. <input checked="" type="checkbox"/> Statement verifying identity of above ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers/cover sheet & documents(s) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation of Document <i>(if applicable)</i> 11. <input type="checkbox"/> Information Disclosure Statement PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
16. Other:	
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <input type="checkbox"/> Cancel in this application original claims of the prior application before calculating the filing fee. <input type="checkbox"/> Amend the specification by inserting before the first line the sentence: This application is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional of application serial no. , filed , entitled , and now .	

18. CORRESPONDENCE ADDRESS					
Correspondence address below					
ATTORNEY'S NAME	John R. Van Amsterdam, Reg. No. 40,212				
NAME	Wolf, Greenfield & Sacks, P.C.				
ADDRESS	600 Atlantic Avenue				
CITY	Boston	STATE	MA	ZIP	02210
COUNTRY	USA	TELEPHONE	(617) 720-3500	FAX	(617) 720-2441

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	John R. Van Amsterdam, Reg. No. 40,212
SIGNATURE	<i>John R. Van Amsterdam</i>
DATE	OCTOBER 19, 2000